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TRANSMITTAL FORM			Filing Date	12-09-2	003			
			First Named Inventor	ki KAMIJO	_			
			Art Unit	1731		_		
(to be used for	r all correspondence after initial	filina)	Examiner Name	E. Hug		_		
Total Number of Pages in This Submission			Attorney Docket Number	46159				
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Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts Incomplete Application Reply to Missing Parts [X]		Remar The Con this com copy of t [X] Any	mmissioner is hereby authoris munication or credit any ove his sheet is attached. additional excess claim fees	Address D zed to charging the charging and the charging	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): ge payment of the following fees associated with Deposit Account No. 18-2220. A duplicate C.F.R. § 1.16. gees under 37 C.F.R. § 1.17.			
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Firm Name						_		
Signature	Roylance, Abrams, Be	rdo & Go	odman, L.L.P. (Customer	No. 0016	09)			
•	Allan (1. 0	M	kme					
Printed name David S. Abrams								
Date 09/27/2007				Reg. No.	22,576			
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METHOD OF PAYMENT (check all that apply)													
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Deposit Account Deposit Account Number: 18-2220 Deposit Account Name: Roylance, Abrams, Berdo & Goodman, L.L.P.													
For the above-identif	ied deposit	account, the Director	is here	eby authorized to	: (check	all that ap	ply)						
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FEE CALCULATION													
1. BASIC FILING, SEAR													
	FILING	FEES S Small Entity	SEAR	CH FEES Small Entity	EXA	/INATIOI	N FEES Entity						
Application Type	Fee (\$)		ee (\$)		<u>Fee</u>		e (\$)	Fees Paid (\$)					
Utility	300	150	500	250	200) 10	00						
Design	200	100	100	50	130) (55						
Plant	200	100	300	150	160) {	30						
Reissue	300	150	500	250	600		00						
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2. EXCESS CLAIM FEE	s	100	Ū	v				Small Entity					
Fee Description						<u> </u>	ee (\$)	Fee (\$)					
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4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)													
Other (e.g., late filing surcharge): Extension of Time (3-month) 1,020.00													
SUBMITTED BY // 2 2													
SUBMITTED BY Signature	777	10/11.	, TF	Registration No. Attorney/Agent) 2			Telephon	9 (000) 050 5555					
1/9/7/	(//	Mum		Attomey/Agent) 2	2,576		 	e (202) 659-9076					
Name (Print/Type) David S. A	brams						Date 09/2	27/2007					

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